PTO/SB/01 (12/97)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction A	Act of 1995, no pe	Attorney D		a collection 6627-P		s it displays a valid OMB control number.			
DEOLADATION FO	. D								
DECLARATION FOR UTILITY OR DESIGNATION		First Name	First Named Inventor Witztum, Joseph L.						
PATENT APPLICA		COMPLETE IF KNOWN							
FAILNI AFI LIOA	11014	Application		unknown					
		Filing Date unknown							
Submitted with Sub	claration omitted after	Group Art		unknown					
Initial Filing Initia	al Filing	Examiner Name unknown							
As a below named inventor, I hereby declare that:									
My residence, post office address, and citizenship are as stated below next to my name.									
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
NEW IMAGING AGENTS				···					
			(Title of the Inve	ention)					
the specification of which									
X is attached hereto									
OR									
was filed on (MM/DD/YYYY) as United States Application Number or PCT International									
Application Number and was amended on (MM/DD/YYYY) (if applicable.)									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
I acknowledge the duty to di	isclose information	on which is ma	iterial to patentab	ility as defi	ned in Title 37 Code	of Federal Regulations, §1.56.			
I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Numbers			Foreign Filing D (MM/DD/YYYY)			Certified Copy Attached? YES NO			
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below.									
Application Number(s) 60/161,493	Date (MM/DD/YYYY)								
00/101,493	60/161,493 Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto								
			(Page 1 of 3)			·			

DECLARATION -	Utility or Design	Patent Application
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I hereby claim the b application designal disclosed in the prio \$112. I acknowledg which became available.	enefit under Title ing the United Si r Unite d States o the duty to disc able between the	35, Ur lates of or PCT lose int Sling o	hied S Ameri Intern iormati ate of	tates Code ica, listed b ational app jon which is the prior a	§120 of a clow and, ilcation in material oplication	iny United S insofer as t the manner to patentable and the nat	itates applicates provided being the control of PC in the control of PC	cation(s), omatter of a matter of a by the first god in Title T internate	or \$385(each of paragra 37, Co ona) fill	c) of any F the claims ph of This de of Fede	CT Into of this 35, Un rai Reg	emational application is not strict States Code strictions §1.56		
U.S. Patent Application PCT F			Parent Number				Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)				
	B. or PCT intern													
As a named inventor, I hereby appoint the following registered practitionar(s) to prosecute this application and to transact ## business in the Patent and Trademark Office connected therewith. Registered practitionar(s) name/registration number listed below:														
Name				Registration Number			Name					Registration Number		
NEIL F. MARTIN JOHN L. HALLER JAMES W. MCCLAIN	1		23,0 27,7	23,088 27,795 24,530						· ·	The Botto Control (1991)			
Direct all correspond	lence to:					<u> </u>	· · · · · · · · · · · · · · · · · · ·				L			
Attorney Name														
Address	BROWN MARTIN HALLER & McCLAIN LLP													
Address	1880 UNION STREET													
City	SAN DIEGO State CALIFORNIA ZIP 92101						4							
Country	USA	Tele	phon	0	(819)	(819) 238-0999			Fax		(819) 238-0082			
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the Exe so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may patent seven thereon. NAME OF SOLE OR FIRST INVENTOR: A patition has been filed for this unsigned inventor														
Given Name (first an	f middle (if any)) Jo	seph	L.		Lest Nan	ne Witt	tum						
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Inventor's Signature Residence: City	2 2 2	Josephally h.			}	Date 10/2	Date 10/28/2000			······································		*		
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City	San Diego			1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1										
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Given Name (first and middle (if any)) Sotirlos			Last Name Talmikos											
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inventor's Signature	Source Series			Date 10/26/00										
Residence: City	San Diego		V V-	State	CA	Country								
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Additional Inver														
(Page 2 of 3)														

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sign (+) inside this box > ______ Approved for use triguigh 9/30/98. OMB 0651-0032

Palent and Tradement Office; U.S. DEPARTMENT F COMMERCE valid QA/B consist number. Please type a plus sign (+) inside this box -> valid ONB control number. ADDITIONAL INVENTOR(S) **DECLARATION** Supplemental Sheet Page 3 of 3 Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle (if any)) Family Name or Sumame Wulf Palinskí inventor's 10-24-00 Signature 10/26/00 Date San Diego CA 92122 Residence: City Country Citizenship 4031-87 Porte Depalmes Post Office Address Post Office Address San Diego City CA 92122 State ZIP USA COUNTRY Name of Additional Joint Inventor, if any: A petition has been filed for this untigned inventor Given Name (first end middle (if any)) Family Name or Surname Peter X. Shaw Inventor's Signature 10/26/00 San Diego CA Residence: City Country USA Chippnahip 10860 Caminito Arcada Post Office Address Peat Office Address City San Diego State ZIP 92131 Country USA Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor Given Name (first and middle [if sny]) Family Name or Sumame Inventor's Signature Date Residence: City State Country Chizenship Foel Office Address Post Office Address Country

Surden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Tradsmark. Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SENU TO: Assistant Commissioner for Patents. Washington, DC 20231.

Please type a plus sign (+) inside this box -

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DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if	any:	A petition has been filed for this unsigned inventor					
Given Name (first and middle [if a	any})	Family	Name or	Surname			
Wulf		Palinski					
Inventor's Signature Wulf Poli	ني كوننا		Date 07-26-02				
Residence: City San Diego							
Malling Address 4031-87 Porte De Palmas							
Mailing Address							
Cay San Diego	State CA	ZIP 92122 Country USA					
Name of Additional Joint Inventor, if any: A petition has been titled for this unsigned inventor							
Given Name (first and middle [if a	ny])	Family Name or Surname					
Peter X.		Shaw					
Inventor's Signature Date 10/26/00							
Residence: City San Dingo	State CA	Country USA	Citizenship				
Malling Address 10860 Caminito Arcada							
Mailing Address							
City San Diego	State CA	ZIP 92131 Country USA					
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor							
Given Name (first and middle (if an	Family Name or Surname						
Inventor's Signature		Date					
Residence: City	State	Country		Citizenship			
Malling Address							
Mailing Address							
City	City State			ntry			

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Weshington, DC 20211. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Chy

San Diego

DECLARATION - Utility or Design Patent Application I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior Unite d States or PCT International application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filling date of the prior application and the national or PCT international filing date of this application. **U.S. Patent Application** Parent Filing Date (MM/DD/YYYY) **PCT Parent Number** Parent Patent Number Number (if applicable) Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Registered practitioner(s) name/registration number listed below: Registration Number Name Registration Number NEIL F. MARTIN JOHN L. HALLER JAMES W. MCCLAIN 23,088 27,795 24,538 Direct all correspondence to: JAMES W. McCLAIM Attorney Name Address **BROWN MARTIN HALLER & McCLAIN LLP** Address 1660 UNION STREET City SAN DIEGO CALIFORNIA State ZIP 92101 Country USA Telephone (619) 238-0999 Fax (619) 238-0062 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Joseph L Last Name Witztum Inventor's Signature 1 lite Date 7/ 26/02 Residence: City San Diego State CA USA Country Citizenship USA Post Office Address 6912 Ofria Ct Post Office Address San Diego City State ÇA 92120 USA Zip Country NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Sotinos Last Name Taimikas inventor's Signature Date 10/26/00 Residence: City San Diego State CA USA Country Citizenship UŞA Post Office Address 2802 Amoldson Ave Post Office Address

ZIp

92122

Country

USA

CA

State

Additional Inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of Information unless it displays a valid OMB control number. 6627-PA0045 Attorney Docket Witztum, Joseph L. First Named Inventor **DECLARATION FOR UTILITY OR DESIGN** COMPLETE IF KNOWN PATENT APPLICATION Application Number 09/699,131 October 26, 2000 Filing Date Declaration Declaration 1641 **Group Art Unit** Submitted with Submitted after Cook, Lisa V. Initial Filing Initial Filing Examiner Name As a below named inventor, I hereby declare that: My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention emitted: **NEW IMAGING AGENTS** (Title of the Invention) the specification of which is attached hereto as United States Application Number or PCT International was filed on (MM/DD/YYYY) 10/26/2000 09/699,131 and was amended on (MM/DD/YYYY) Application Number I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any emendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.58. I hereby claim foreign priority benefits under Title 35, United States Code §119(s)-(d) or §365(b) of any foreign application(s) for patent or invento certificate, or \$365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed. Foreign Filing Date Priority Cartified Copy Altached? Prior Foreign Application Country Not Claimed YES (MM/DD/YYYY) Numbers Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under Title 35, United States Code § 119(e) of any United States provisional application(s) listed below. Filing Date (MM/DD/YYYY) Application Number(s)

(Page 1 of 3)

Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto

10/26/1999

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